



**HAWAII STATE ETHICS COMMISSION**  
1001 BISHOP STREET, PACIFIC TOWER 970  
P.O. BOX 616, HONOLULU, HAWAII 96809  
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STATE OF HAWAII  
STATE ETHICS COMMISSION

## LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

### PART I LOBBYIST

NAME(Last)	(First)	(Middle)	TELEPHONE
Pregill	Carol		592-4200
MAILING ADDRESS (Street)			FAX
1240 Ala Moana Blvd., Suite 215			592-4202
(City)	(State)	(Zip Code)	
Honolulu	HI	96814	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
Retail Merchants of Hawaii			592-4200
MAILING ADDRESS (Street)			FAX
1240 Ala Moana Blvd., Suite 215			592-4202
(City)	(State)	(Zip Code)	
Honolulu	HI	96814	

### PART II ORGANIZATION

NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)	TELEPHONE	
Retail Merchants of Hawaii	592-4200	
MAILING ADDRESS (Street)	FAX	
1240 Ala Moana Blvd., Suite 215	592-4202	
(City)	(State)	(Zip Code)
Honolulu	HI	96814
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT	TELEPHONE	
Carol Pregill	592-4200	
MAILING ADDRESS (Street)	FAX	
1240 Ala Moana Blvd., Suite 215	592-4202	
(City)	(State)	(Zip Code)
Honolulu	HI	96814

**PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY**

- |  |   |   |  |
|--|---|---|--|
| <input type="checkbox"/> Agriculture                               | <input type="checkbox"/> Education                                  | <input type="checkbox"/> Human Services                                     | <input checked="" type="checkbox"/> Science, Technology & Economic Development |
| <input type="checkbox"/> Communications & Public Utilities         | <input checked="" type="checkbox"/> Government Operations & Finance | <input type="checkbox"/> Intergovernmental Relations, International Affairs | <input checked="" type="checkbox"/> Tourism & Recreation                       |
| <input checked="" type="checkbox"/> Consumer Protection & Commerce | <input type="checkbox"/> Hawaiian Affairs                           | <input checked="" type="checkbox"/> Labor & Employment                      | <input type="checkbox"/> Transportation  |
| <input type="checkbox"/> Culture, Arts, Historic Preservation      | <input type="checkbox"/> Health                                     | <input type="checkbox"/> Planning, Land & Water Use Management              | <input type="checkbox"/> Other: (indicate below)                               |
| <input type="checkbox"/> Ecology, Energy Environmental Protection  | <input type="checkbox"/> Housing                                    | <input type="checkbox"/> Public Safety & Corrections                        | _____  |

**PART IV CERTIFICATION OF LOBBYIST**

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.



01-20-05

(Signature of Lobbyist)

(Date)

**PART V AUTHORIZATION TO LOBBY**

NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED
<del>XXXXXX</del> Robert Taylor	<del>XXXXXX</del> Chairman

NAME OF ORGANIZATION (if applicable)

Retail Merchants of Hawaii

TELEPHONE

592-4200

MAILING ADDRESS (Street)

1240 Ala Moana Blvd., Suite 215

FAX

592-4202

(City)

(State)

(Zip Code)

Honolulu

HI

96814

I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.

  
(Signature of Authorizing Officer or Person Represented)1/27/05  
(Date)